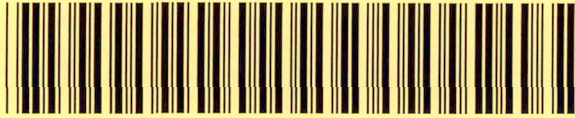


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DocumentID NONCD0002867

Site Name ATKINSON ST CONTAMINATION

DocumentType Correspondence (C)

RptSegment 1

DocDate 11/20/2008

DocRcvd 11/20/2008

Box SF2206

AccessLevel PUBLIC

Division WASTE MANAGEMENT

Section SUPERFUND

Program IHS (IHS)

DocCat FACILITY

NORTH CAROLINA DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

IN THE MATTER OF: Bernard Allen Memorial Emergency Drinking Water Fund
Eligibility by:

UNDER THE AUTHORITY OF)
NORTH CAROLINA GENERAL)
STATUTES § 87-98)

AFFIDAVIT
RE: Household Income Verification

Penny Myers, being duly sworn, hereby deposes and says:

1. I am/we are the owner of property generally referred to as 109 Atkinson St Hamlet, NC 28345
2. I am/we are applying for eligibility under the North Carolina General Statute (N.C.G.S.) § 87-98 (Bernard Allen Memorial Emergency Drinking Water Fund) for an alternate water supply for the property generally referred to as
3. I/We hereby certify, under the pains and penalties of perjury, that I/We meet the eligibility requirements of N.C.G.S. § 87-98(c), in that my/our household gross income for calendar year 2006 is not greater than three hundred percent (300%) of the current federal poverty guidelines determined by the US Department of Health and Human Services, as listed below:

2007 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family	Poverty guideline
1.....	\$10,210
2.....	13,690
3.....	17,170
4.....	20,650
5.....	24,130
6.....	27,610
7.....	31,090
8.....	34,570

For families with more than 8 persons, add \$3,480 for each additional person.

4. I hereby certify, under the pains and penalties of perjury, that I/we have not caused or contributed to the groundwater contamination resulting in the need to seek eligibility for use of the Bernard Allen Memorial Drinking Water Fund. .

Affiant further saith not.

Penny Myers
Signature/Printed Name

11/20/2008
Date

Sworn to and subscribed before me

this 20 day of Nov, 2008

Eileen Kay Notary Public

My commission expires: 9-23-2012

(SEAL)



9/04/07